As we are about to enter year 2 for the new team of editors, the time is right to say a few words about our progress. The editors are grateful to all referees for their prompt and thorough contributions to the editorial process and to all authors who consistently and reliably submit their best research to Hypertension. We regularly ask for and receive your feedback, and this is an important way to improve the journal.

Our main objectives remain unchanged and include: (1) to publish the highest quality of original basic and clinical research relating to hypertension; (2) to increase the readership and scientific importance of Hypertension; (3) to provide fair and quick reviews for submitted articles followed by a rapid publication of all accepted articles; (4) to serve well the international community of hypertension researchers and practitioners; (5) to be an important vehicle for achieving the mission of the American Heart Association, and to effectively serve the Council for High Blood Pressure Research and the Council on the Kidney in Cardiovascular Disease.

Since the last Editorial,1 we have invited 5 guest editors to help the editorial team with articles where there is a perceived conflict of interest. We also asked guest and consulting editors to assist with the large volume of articles submitted for the Council for High Blood Pressure Research supplement. As of November 2012, our current guest editors are as follows: Morris Brown, David Calhoun, S. Ananth Karumanchi, Theodore Kotchen, Ji-Guang Wang, and R. Clinton Webb.

In 2012, we continued to accept only the best work with the average acceptance rate close to 20%. For the first half of 2012, 62% of submissions were clinical and population science, and 38% were basic science articles. Approximately 49% of published articles were related to clinical and population science, with 51% related to basic science. This represents a small increase in both submissions (2%) and published articles (5%) in the area of clinical and population science.

The Journal Citation Reports’ scientific impact factor for Hypertension for 2011 was 6.207. This continues to be the highest impact factor of any journal devoted to basic or clinical hypertension research. Hypertension is ranked fourth in the category of peripheral vascular disease by the Journal Citation Reports. The cited half-life of Hypertension articles increased to 7.7 years, indicating that articles published in our journal continue to be cited for many years after publication.

Several new initiatives were developed to increase accessibility to the journal. Hypertension launched an App on the iPad in March 2012 which has been downloaded thousands of times in its first few months. We also established a presence on Facebook (Hypertension--AHA) and Twitter (@HyperAHA).

An important goal of the editors is to ensure that the content of Hypertension meets the needs of our readers. We therefore developed a new Clinical Implications feature, which has also been used for publicity. In addition, all authors of original scientific articles now include a brief section called Novelty and Significance to allow a general audience to quickly understand the salient points of the research presented.

As in previous years, we continue to commission new topical reviews and look forward to receiving further suggestions for topics that are timely, controversial, and educational. These reviews will complement major guidelines and statements, which are being prepared by the Publication Committees of the American Heart Association Council for High Blood Pressure Research and the Council on the Kidney in Cardiovascular Disease.

As the first year of the new editorial team comes to an end, we welcome new opportunities, advice, and suggestions to make Hypertension even better and more relevant to your interests, needs, and expectations. Hypertension is the top journal in its field, but there is always room for improvement in the clinical and scientific impact of the journal.

Reference
Hypertension: Update 2013
Anna Dominiczak

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